DISBR24 (12.0)

Approved for use through 07/31/2006 MB (82)

U.S. Patient and Trademark Office; U.S. DEPARMENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a codection of information unless of deplayers a valid URM control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	DSH007
Application Number 10/581,730	Filed 06-06-2006
For Material Discharge Apparatus and Method	
Art Unit 3754	Examiner Andrew Philip Bainbridge
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):	
<u>Fee</u>	Small Entity Fee
One month (37 CFR 1.17(a)(1)) \$120	\$60 \$
Two months (37 CFR 1.17(a)(2)) \$450	\$225
Three months (37 CFR 1.17(a)(3)) \$1020	\$510 S
Four months (37 CFR 1.17(a)(4)) \$1590	\$795 \$
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080 \$
Applicant claims small entity status. See 37 CFR 1.27.	
A check in the amount of the fee is enclosed.	
X Payment by credit card. Form PTO-2038 is attached.	
The Director has already been authorized to charge fees in this application to a Deposit Account.	
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 503321 I have enclosed a duplicate copy of this sheet.	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	
I am the applicant/inventor.	
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	
attorney or agent of record. Registration Number _	51,286
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	
Sam Zaghmout	November 24, 2009
Signature	Date
Dr. O. M. (Sam) Zaghmout	51,286
Typed or printed name	Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature as required, see below	
X Total of one forms are submitted.	

This collection of information is required by 3 CFR 1.138(a). The information is required to obtain or retain a borroll by the public vertice is to file (and by the LIPFTO process) an explication. Continentally is governed by 53 U.S. C. 129 and 3 CFR 1.11 and 14.1 This collection is estimated to false for immutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commission that amount of time you require to complete this form and/or suggestions for reducing the subtract, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 2231-3450. DO NOT SEND FEES OR COMPLETED FORMS TO 1186 ADDRESS SEND TO: Commissioner of Patients, P.O. Box 1450, Alexandria, VA 2231-3450.